

Provider Type / Specialty

NE	Spec	Sub
28	<i>HOSPITALS</i>	
	001	<i>General Inpatient</i>
	004	<i>General Outpatient</i>
	006	<i>Physician</i>
		414 Prosthetics/Orthotics Services
		416 MR Waiver Services
	009	<i>Dentist</i>
	010	<i>Pharmacy</i>
	023	<i>Swing Beds</i>
	029	<i>Ambulance</i>
	103	<i>Distinct Part Unit</i>
		313 Psych Unit
		314 Skilled Nursing Unit